

DRIVER LICENSE DATA ACCESS SECURITY CERTIFICATION

I, _____, agree to abide by the following restrictions.
(print name)

Driver license information obtained using the authorization granted to me as a user of the Federal Motor Carrier Safety Administration (FMCSA) CDLIS access software, or as the person responsible for safeguarding data provided via the "offline" access, is limited to use for law enforcement or government purposes authorized under the authority of the FMCSA motor carrier safety program.

I agree to protect the data from view, access, use, or misuse by others not authorized access to CDLIS data under the authority of the FMCSA motor carrier safety program.

I also agree to follow due diligence to prevent any other person not authorized by FMCSA to access CDLIS data from being able to access this data.

Any use for an unauthorized reason, or allowing unauthorized access to this data, is subject to disciplinary actions as defined by the FMCSA, the state or local government where employed, or the state from which the data was obtained.

I have been informed that all accesses are logged and reported as part of the usage oversight and monitoring program, and I have received a copy of the security oversight monitoring processes applied to my usage.

(print organization name)

(signature)

(date)

Send original to:

TML
CDLIS Access
116-55 Queens Blvd
Forest Hills, NY 11375

AAMVAnet Inc.
CDLIS USER REQUEST FOR
ACCESS TO CDLIS

USER INFORMATION

DATE _____ USER NAME _____

AGENCY _____ TELEPHONE _____

ADDRESS AT AGENCY _____

USER ID REQUESTED _____

(The definitions for constructing a CDLIS Access User ID must be followed.)

AUTHORIZATION BY COORDINATOR

I authorize the above named user to have access to CDLIS data through the Federal Motor Carrier Safety Administration (FMCSA) gateway provider, TML.

Authorized CDLIS _____
Access Coordinator (print name)

Coordinator Address _____

The coordinator address must be a STREET address to which FEDEX can make delivery!

COORDINATOR RESPONSIBILITIES

1. Coordinators are signing on behalf of the users and are accepting responsibility for monitoring their usage and initiating action if the usage appears questionable;
2. Coordinators are responsible for advising users that data acquired using the FMCSA CDLIS access software must only be used for law enforcement, research, or monitoring programs defined under the programs of the Federal Motor Carriers Safety Administration, and that the user is responsible for protecting the data from view, access, use, or misuse by others not authorized as users of the FMCSA CDLIS access;
3. Coordinators are responsible for getting users to sign the security certification form, giving users a copy of the monitoring procedures, and advising users that unauthorized use of state data will also be subject to the state specific laws governing use of data.

Coordinator _____ Date _____

Signature _____

**Please fax completed application form with cover sheet indicating it is to the attention of:
Jermaine Williams at 703/522-2413 or 703/522-1553.**